

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIAL	ID NO.	DATE
FEES DETERMINATION	SP		6-19-01
O.I.P.E. CLASSIFIER		4/3	6/28/01
FORMALITY REVIEW	MM	920	08-24-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 -+ Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	6/19/01
2	✓	✓	6/19/01
3			
4			
5			
6			
7			
8	✓	✓	6/19/01
9	✓	✓	6/19/01
10	○○○	○○○	6/19/01
11	○○○	○○○	6/19/01
12	○○○	○○○	6/19/01
13	✓	✓	6/19/01
14	✓	✓	6/19/01
15			
16			
17			
18			
19			
20			
21			
22			
23			
24			
25			
26	✓	✓	6/19/01
27	✓	✓	6/19/01
28	○○○	○○○	6/19/01
29	✓	✓	6/19/01
30	✓	✓	6/19/01
31	✓	✓	6/19/01
32	N		
33	✓	✓	6/19/01
34			
35			
36			
37			
38			
39			
40			
41			
42			
43			
44			
45			
46			
47			
48			
49			
50	N		

If more than 150 claims or 10 actions
staple additional sheet here

5-10
10-24-01
10-24-01